## OMB No. 1660-0008 **ELEVATION CERTIFICATE** U.S. DEPARTMENT OF HOMELAND SECURITY Expires February 28, 2009 Federal Emergency Management Agency Important: Read the instructions on pages 1-8. National Flood Insurance Program SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name Policy Number William Smith A2. Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3802 Wood bridge Road Company NAIC Number ZIP Code 9765 on (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 4, Foster Creek Addition A3. Property Residential A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat. \_ Horizontal Datum: NAD 1927 NAD 1983 Long. A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number\_\_\_\_\_\_ A9. For a building with an attached garage, provide: A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of attached garage a) Square footage of crawl space or enclosure(s) sa ft b) No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade \_ c) Total net area of flood openings in A8.b c) Total net area of flood openings in A9.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number Floadville 123456 B2. County Name 51 Isler B7. FIRM Panel Effective/Revised Date B6. FIRM Index B9. Base Flood Elevation(s) (Zone B5. Suffix B8. Flood B4. Map/Panel Number Zone(s) AO, use base flood depth) 5/15/80 1142.8 B 123456 5/15/80 A15 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIRM Community Determined Other (Describe) Indicate elevation datum used for BFE in Item B9: X NGVD 1929 ■ NAVD 1988 Other (Describe) SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Building elevations are based on: Construction Drawings\* Building Under Construction\* \*A new Elevation Certificate will be required when construction of the building is complete. C1. Building elevations are based on: Construction Drawings\* Finished Construction C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized NGS 14-21 Vertical Datum NGVD 29 Check the measurement used. **△** det meters (Puerto Rico only) Top of bottom floor (including basement, crawl space, or enclosure floor) 1145 meters (Puerto Rico only) b) Top of the next higher floor ☐ feet meters (Puerto Rico only) Bottom of the lowest horizontal structural member (V Zones only) NIA meters (Puerto Rico only) Attached garage (top of slab) feet 1144 Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) meters (Puerto Rico only) 1144 2 Teet meters (Puerto Rico only) Lowest adjacent (finished) grade (LAG) 1/44.5 V feet meters (Puerto Rico only) Highest adjacent (finished) grade (HAG) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data avail I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form. License Number 70 501 Registered Land Surveyor St. Paul City Flood Nears & Co.

FEMA Form 81-31, February 2006

See reverse side for continuation.

Replaces all previous editions

	aces, copy the corresponding information fro		For Insurance Company Use:
	ng Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route a	and Box No.	Policy Number
Flood ville	State ST	9876	Company NAIC Number
	CTION D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFICATION (CO	NTINUED)
copy both sides of this Elevation	n Certificate for (1) community official, (2) insurance	agent/company, and (3) building o	wner.
Comments C Z =	I at home a mater best	er located insid	
G, 5, E.		er lucated visia	
	attached garage		
Signature 7	/ Da	ite - / / / /	
ng him		10/10/07	Check here if attachmen
SECTION E - BUILDING	S ELEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without	BFE), complete Items E1-E5. If the Certificate is inten	nded to support a LOMA or LOMR-	F request, complete Sections A, B,
	atural grade, if available. Check the measurement unition for the following and check the appropriate boxe		
	est adjacent grade (LAG).		_
	cluding basement, crawl space, or enclosure) is cluding basement, crawl space, or enclosure) is	feet   meters   meters	above or below the HAG. above or below the LAG.
	8 with permanent flood openings provided in Section		
(elevation C2.b in the dia	grams) of the building is 🔲 feet 🔲	meters above or below	
<ol> <li>Attached garage (top of see.</li> <li>Top of platform of machines.</li> </ol>		feet meters	above or below the HAG.
5. Zone AO only: If no floor	depth number is available, is the top of the bottom fl	loor elevated in accordance with th	
ordinance? Yes	No Unknown. The local official must certify this	s information in Section G.	
SE	CTION F - PROPERTY OWNER (OR OWNER)	'S REPRESENTATIVE) CERT	IFICATION
he property owner or owner's	authorized representative who completes Sections A,	, B, and E for Zone A (without a FE	MA-issued or community-issued BFE
r Zone AO must sign here. Ti	e statements in Sections A, B, and E are correct to the		
Property Owner's or Owner's A	uthorized Representative's Name		
Address	City	State	ZIP Code
Signature	Date	Teleph	ione
Comments	1.000.000	7100000	0000.207
Zoniments			<u> </u>
			Check here if attachme
1000	SECTION G - COMMUNITY INFO	ORMATION (OPTIONAL)	
	d by law or ordinance to administer the community's		
	<ul> <li>Complete the applicable item(s) and sign below. Of tion C was taken from other documentation that has t</li> </ul>		
	certify elevation information. (Indicate the source an		
is authorized by law to	empleted Section E for a building located in Zone A (v	without a FEMA-issued or commun	nity-issued BFE) or Zone AO.
is authorized by law to	ompleted Section E for a building located in Zone A (v on (Items G4G9.) is provided for community floodpla		ity-issued BFE) or Zone AO.
is authorized by law to 2. A community official co 3. The following informat			
is authorized by law to 2. A community official or 3. The following informat 34. Permit Number	on (Items G4,-G9.) is provided for community floodpla G5. Date Permit Issued	ain management purposes.  G6. Date Certificate Of Cor	
is authorized by law to A community official or The following informat A. Permit Number  7. This permit has been issued	on (Items G4,-G9.) is provided for community floodple  G5. Date Permit Issued  for: New Construction Substantial Im	G6. Date Certificate Of Cor	npliance/Occupancy Issued
is authorized by law to A community official or The following informat A. Permit Number This permit has been issued B. Elevation of as-built lowest f	on (Items G4,-G9.) is provided for community floodple  G5. Date Permit Issued  for: New Construction Substantial Import (Including basement) of the building:	G6. Date Certificate Of Corprovement	npliance/Occupancy Issued
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<b>Building</b>	Photograp	hs
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See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number	
City	State	ZIP Code	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

uilding Street Address (inch.	Continuation F ding Apt., Unit, Suite, and/or Bldg. No.) or F		For Insurance Company Use Policy Number
suliding Street Address (Inclu-	aing Apt., Onit, Suite, and/or Bidg. No.) or r	.O. Roule and Box No.	r oicy Number
City	State	ZIP Code	Company NAIC Number
f submitting more photogr hotographs with: date take	aphs than will fit on the preceding pa n; "Front View" and "Rear View"; and, if	ge, affix the additional pho required, "Right Side View" a	tographs below. Identify a and "Left Side View."